WOODSIDE LUTHERAN HOME

1040 PILGRIM WAY

GREEN BAY 54304 Phone: (920) 499-1481		Ownership:	Nonprofit Church
Operated from 1/1 To 12/31 Days of Operation:	365	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	Yes
Number of Beds Set Up and Staffed (12/31/03):	168	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/03):	168	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/03:	154	Average Daily Census:	160

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents	(12/31/03)	Length of Stay (12/31/03)	%
Home Health Care Supp. Home Care-Personal Care		 Primary Diagnosis 					12.3 40.9
Supp. Home Care-Household Services		Developmental Disabilities		 Under 65		•	24.0
Day Services	No	Mental Illness (Org./Psy)	37.7	65 - 74	3.2		
Respite Care	Yes	Mental Illness (Other)	0.0	75 - 84	35.1		77.3
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	52.6	* * * * * * * * * * * * * * * * * * *	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.6	95 & Over	8.4	Full-Time Equivalent	
Congregate Meals	No	Cancer	5.2			Nursing Staff per 100 Res	idents
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)	
Other Meals	No	Cardiovascular	21.4	65 & Over	99.4		
Transportation	No	Cerebrovascular	14.3			RNs	13.0
Referral Service	No	Diabetes	9.7	Gender	용	LPNs	5.5
Other Services	No	Respiratory	1.3			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	9.7	Male	29.2	Aides, & Orderlies	43.8
Mentally Ill	No			Female	70.8		
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		
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Method of Reimbursement

		edicare			edicaid itle 19			Other		:	Private Pay			amily Care			anaged Care			
Level of Care	No.	90	Per Diem (\$)	No.	olo Olo	Per Diem (\$)	No.	્રે ૦	Per Diem (\$)	No.	οlo	Per Diem (\$)	No.	%	Per Diem (\$)	No.	્ર	Per Diem (\$)	Total Resi- dents	of
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	8	100.0	329	74	94.9	118	0	0.0	0	61	89.7	170	0	0.0	0	0	0.0	0	143	92.9
Intermediate				4	5.1	98	0	0.0	0	7	10.3	170	0	0.0	0	0	0.0	0	11	7.1
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	8	100.0		78	100.0		0	0.0		68	100.0		0	0.0		0	0.0		154	100.0

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WOODSIDE LUTHERAN HOME

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Admissions, Discharges, and	1	Percent Distribution	of Residents'	Condit	ions, Services, a	nd Activities as of	12/31/03
Deaths During Reporting Period							
	l				% Needing		Total
Percent Admissions from:		Activities of	8	As	sistance of	% Totally	Number of
Private Home/No Home Health	2.7	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.0	Bathing	0.0		67.5	32.5	154
Other Nursing Homes	10.4	Dressing	4.5		79.2	16.2	154
Acute Care Hospitals	76.4	Transferring	9.1		61.0	29.9	154
Psych. HospMR/DD Facilities	0.0	Toilet Use	6.5		66.9	26.6	154
Rehabilitation Hospitals	0.0	Eating	38.3		52.6	9.1	154
Other Locations	10.4	******	*****	*****	*****	*****	*****
Total Number of Admissions	182	Continence		용	Special Treatme	nts	용
Percent Discharges To:		Indwelling Or Extern	al Catheter	3.9	Receiving Res	piratory Care	12.3
Private Home/No Home Health	51.6	Occ/Freq. Incontinen	t of Bladder	70.8	Receiving Tra	cheostomy Care	0.0
Private Home/With Home Health	1.6	Occ/Freq. Incontinen	t of Bowel	39.0	Receiving Suc	tioning	0.0
Other Nursing Homes	0.5				Receiving Ost	omy Care	0.0
Acute Care Hospitals	4.8	Mobility			Receiving Tub	e Feeding	1.3
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	5.8	Receiving Mec	hanically Altered D	iets 34.4
Rehabilitation Hospitals	0.0				_	_	
Other Locations	9.0	Skin Care			Other Resident	Characteristics	
Deaths	32.4	With Pressure Sores		7.1	Have Advance	Directives	96.8
Total Number of Discharges	i	With Rashes		7.1	Medications		
(Tarabadian Bankha)	100				Beerlades Beer	-1	F 0 1

Receiving Psychoactive Drugs 59.1

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

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(Including Deaths)

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Non	orofit	100	-199	Ski	lled	Al	1
	Facility	Facility Peer Group			Group	Peer	Group	Faci	lities
	8	%	Ratio	용	Ratio	%	Ratio	용	Ratio
	05.0	00.0	1 04	07.6	1 00	00.1	1 00	07.4	1 00
Occupancy Rate: Average Daily Census/Licensed Beds	95.2	92.0	1.04	87.6	1.09	88.1	1.08	87.4	1.09
Current Residents from In-County	90.9	85.9	1.06	83.0	1.09	82.1	1.11	76.7	1.18
Admissions from In-County, Still Residing	26.4	22.1	1.19	19.7	1.34	20.1	1.31	19.6	1.34
Admissions/Average Daily Census	113.8	138.9	0.82	167.5	0.68	155.7	0.73	141.3	0.80
Discharges/Average Daily Census	117.5	139.5	0.84	166.1	0.71	155.1	0.76	142.5	0.82
Discharges To Private Residence/Average Daily Census	62.5	64.3	0.97	72.1	0.87	68.7	0.91	61.6	1.01
Residents Receiving Skilled Care	92.9	96.1	0.97	94.9	0.98	94.0	0.99	88.1	1.05
Residents Aged 65 and Older	99.4	96.4	1.03	91.4	1.09	92.0	1.08	87.8	1.13
Title 19 (Medicaid) Funded Residents	50.6	55.4	0.91	62.7	0.81	61.7	0.82	65.9	0.77
Private Pay Funded Residents	44.2	32.6	1.35	21.5	2.06	23.7	1.86	21.0	2.11
Developmentally Disabled Residents	0.0	0.6	0.00	0.8	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	37.7	36.2	1.04	36.1	1.04	35.8	1.05	33.6	1.12
	9.7	24.3	0.40	22.8	0.43	23.1	0.42	20.6	0.47
General Medical Service Residents									
Impaired ADL (Mean)	55.7	50.5	1.10	50.0	1.11	49.5	1.12	49.4	1.13
Psychological Problems	59.1	58.5	1.01	56.8	1.04	58.2	1.02	57.4	1.03
Nursing Care Required (Mean)	7.8	6.8	1.14	7.1	1.10	6.9	1.13	7.3	1.06